

Period of Service

[ANRV POS LIST] [Synonym:11]

This option provides an alphabetic printout of the entire VIST Roster by period of service. You can sort by a particular period of service, or the report will print alphabetically by period of service (i.e., Korean Era would be listed before Vietnam War).

Referral Source List

[ANRV REFERRAL SOURCE LIST] [Synonym:12]

This option provides an alphabetic printout of the entire VIST Roster by referral source (who referred veteran to VIST). A date range can be entered for this printout. You can sort by a particular referral source, or the report will print alphabetically by referral source.

Annual Review Dates List

[ANRV ANNUAL REVIEW LIST] [Synonym:13]

This option provides a printout of past VIST Reviews sorted by date. The printout includes the Review date, veteran's name, last four social security numbers, and the status of the review and the type of review. A date range can be entered for this printout.

VIST Eligible (AMIS) List

[ANRV VIST ELIG LIST] [Synonym:14]

This option provides an alphabetic printout of the entire VIST Roster sorted by VIST eligible (AMIS) category (001,002,003, NO-NOT LEGALLY BLIND). The report includes the veteran's name, social security number, and VIST Eligible (AMIS) category.

AMIS Report

[ANRV AMIS REPORT] [Synonym:12]

This option provides a printout of the calculated totals for every category from 001 through 049 of the semi-annual AMIS report. If the VIST Roster contains incomplete AMIS (mandatory category) information, this option will print a list of those records by patient name and social security number at the end of the AMIS report.

This option may also be used to transmit the AMIS report to the program office.



Double check all figures to ensure the accuracy of the results.

Example: Transmission of AMIS Report

Select Print VIST Roster Menu Option: 12 AMIS Report

I WILL PRINT THE AMIS REPORT FOR PERIOD SPECIFIED.

BEGINNING AMIS DATE: T-10 (APR 10, 1998)

ENDING AMIS DATE: T (APR 20, 1998)

Do you want to email the AMIS report to the program office?(Y/N)? Y (Yes)

Enter Average Man Hours Expensed by
VIST Coordinator Per Week or ^ to exit: ?

Field 050 - Average Man Hours must be entered

Must be a number between 1 and 9999.99
Up to 2 decimal precision is allowed.

Enter Average Man Hours Expensed by
VIST Coordinator Per Week or ^ to exit: 1

Example: AMIS Report Printout

Select Print VIST Roster Menu Option: 12 AMIS Report

I WILL PRINT THE AMIS REPORT FOR PERIOD SPECIFIED.

BEGINNING AMIS DATE: T-10 (APR 10, 1998)

ENDING AMIS DATE: T (APR 20, 1998)

Do you want to email the AMIS report to the program office?(Y/N)? N (No)

DEVICE: [Select Print Device]

Do you want your output QUEUED? NO// <ENTER> (NO)

.....report follows.....

VISUAL IMPAIRMENT SERVICE TEAM (VIST)
AMIS CODE SHEET

FACILITY: BIRMINGHAM ISC (#14)

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Period Beginning: APR 10,1998

Period Ending: APR 20,1998

	FIELD CODE	TOTAL
TOTAL VIST ELIGIBLE VETERANS	001	9
NON VIST ELIGIBLE VETERANS		
Reviewed for BRC Attendance	002	2
Other	003	3
		<hr/> 14
VISUAL ACTIVITY		
No Sight	004	1
LP up to and including 5/200	005	0
LP of 6/200 to 20/200	006	1
Legally Blind by field restriction	007	2
Not known	008	5
		<hr/> 9
MAJOR ACTIVITY		
Employed for pay	009	2
Engaged in training or school	010	1
Volunteer work (10 hrs/wk)	011	0
Retired w/approp. activities	012	0
Too ill or too disabled	013	2
No well defined activity	014	1
Not known	015	3
		<hr/> 9
PERIOD OF SERVICE		
WWI, Spanish American War	016	0
WWII	017	1
Korean	018	0
Vietnam Era	019	0
Peacetime	020	4
Not known	021	4
		<hr/> 9
ENTITLEMENT		
Service Connected		
0% only	022	1
Comp. SC, 10% - SMC	023	0
SC for blindness	024	5
NSC Pension A&A/HB	025	0
		<hr/> 6
AGE CATEGORY		
Under 25	026	1
25-34	027	1
35-44	028	2
45-54	029	2
55-64	030	1
65-74	031	0
75-84	032	1
85 and over	033	1
Not known	034	0
		<hr/> 9

Printing the VIST Roster

TOTAL NUMBER OF VIST ANNUAL REVIEWS	035	0
DECLINED VIST ANNUAL REVIEW	036	0
'NO SHOW' FOR VIST ANNUAL REVIEW	037	0
VIST COORDINATOR AND COORDINATOR	038	1
INITIATED FIELD VISITS		
VIST REFERRALS		
Blind Rehabilitation Center		
First Experience	039	0
Additional Training	040	0
Blind Rehabilitation Clinic		
First Experience	041	0
Additional Training	042	0
Other Non-VA Agencies		
First Experience	043	0
Additional Training	044	0
VETERANS NOT ACCEPTED FOR BLIND		
REHABILITATION		
Blind Rehabilitation Center	045	0
Blind Rehabilitation Clinic	046	0
VETERANS DISCHARGED DURING		
REPORT PERIOD		
Blind Rehabilitation Center	047	0
Blind Rehabilitation Clinic	048	0
Other Non-VA	049	0
AVERAGE MAN HOURS EXPENSED BY	050	_____ hours
VIST COORDINATOR PER WEEK		

PATIENTS WITH MISSING AMIS DATA

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DAVIS,PAULETTE          223334445
ALLEN,PATRICK           737373737
  
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